

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>S</i>		<i>10/22-01</i>
O.I.P.E. CLASSIFIER		<i>1018</i>	<i>10/24/01</i>
FORMALITY REVIEW	<i>FR</i>		

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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